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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.18 (e))
required)

Attorney/Deputy Number	I-2-0284.1US
First Named Inventor	Kazakovich et al.
COMPLETE IF KNOWN	
Application Number	Not Yet Known
Filing Date	Not Yet Known
Group Art Unit	Not Yet Known
Examiner Name	Not Yet Known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR IMPLEMENTING SMART ANTENNAS AND DIVERSITY TECHNIQUES

☒ The specification of which
is attached hereto.

(Title of the Invention)

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendments specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) or any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Priority Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
80/363,061	03/08/2002

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 5)

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PTO/SB/01 (12-97)

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(1) of any PCT International application designating the United States of America, listed below and, transfer as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number

Parent Filing Date (MM/DD/YYYY)

Parent Patent Number (if applicable)

☒ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

All assigned inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number **24374** OR ☐ Registered practitioner(s) name/registration number listed below

Please Customer Number/Bar Code Label here

Name
Notably, the Attorneys of
Volpe and Koenig, P.C.

Registration
Number

Name

Registration
Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number **24374** OR ☐ Correspondence address below

Name **VOLPE AND KOENIG, P.C. DEPT ICC**

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and correct; that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1901 and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle if any)

Family Name or Surname

Leonid

Kazakevich

Inventor's
Signature

Leonid Kazakevich

Date

1/15/05

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Country

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Citizenship

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Mailing Office Address

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Plainview

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Zip

11863


Country

USA

☐ Additional inventors are being named on the supplemental (Additional Inventors) sheet(s) PTO/SB/02A attached (if any).

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PTO/59/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gerard		Klahn	
Inventor's Signature <i>Gerard Klahn</i>		Date 12-18-2002	
Residence: City	State	Country	Citizenship
Sayville	NY	USA	USA
Mailing Address 128 Budenos Drive			
Mailing Address			
City	State	ZIP	Country
Sayville	NY	11782	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Fath		Ozluturk	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Port Washington	NY	USA	USA
Mailing Address 70 Willowdale Avenue			
Mailing Address			
City	State	ZIP	Country
Port Washington	NY	11050	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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PTO/25/02A (11-00)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gerard		Klahn	
Inventor's Signature		Date	
Residence: City	Sayville	State	NY
Country	USA	Citizenship	USA
Mailing Address 128 Budenos Drive			
Mailing Address			
City	Sayville	State	NY
ZIP	11782	Country	USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Fatih		Ozluturk	
Inventor's Signature <i>Fatih M. Ozluturk</i>		Date 12/18/02	
Residence: City	Port Washington	State	NY
Country	USA	Citizenship	USA
Mailing Address 70 Willowdale Avenue			
Mailing Address			
City	Port Washington	State	NY
ZIP	11050	Country	USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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